Amendment Transmittal & Petition for Extension of Time under 37 CFR 1.136(a)

Docket Number

DEX0531US.NP

Address To Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

	Title of Invention								
Methods of Detecting Lp-PLA2 Activity									
First Named Inventor	Robert L. Wolfert								
Application No.	10/588,339								
Filing Date	June 18, 2007								
Examiner	Haq, Shafiqul								
Art Unit	1641								
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Transmitted berewith is	an amandment in t	he above-identified applicat	lon	*					
Hallstillted Herewith is	an amenument in t	ne above-identined applicat	юп.						
This is also a petition un application.	nder the provisions	of 37 CFR 1.136(a) to exter	d the period fo	or filing a re	eply in the above identified				
The requested extension	on and fee are as sh	own below (check time peri	od desired).						
		Fee Calculation	on						
		Extension of Time	Fee						
X One month (37 C	CFR 1.17(a)(1))	☐ Two months (37 CFR	1.17(a)(2))	Thre	e months (37 CFR 1.17(a)(3))				
	Four months (3	7 CFR 1.17(a)(4))	ive months (3	7 CFR 1.17	7(a)(5))				
Claims as Amended									
For	#Filed	#Previously Paid For	#Extra	Rate	Fee				
Total Claims	21	- 21 =		× 52 =					
Total Indep. Claims	2	- 3 =		× 220 =					
Multiple Dependent Claims (check if applicable)									
Extension Fee (from above) \$1 Applicant claims small entity status. See 37 CFR 1.27. TOTAL \$1									
Applicant claims	s small entity status	. See 37 CFR 1.27.		TOTAL	\$130				
		Method of Payn	nent						
☐ Deposit Account		Check Money C	Order 🔲 O	ther:					
Deposit Account Num	ber 50-1619				***************************************				
	-	count, the Director is h	ereby autho	rized to:	(check all that apply)				
Charge the fee(s)			7 OED 4 40 o-	J 1 17					
X Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17Charge fee(s) indicated above, except for the filing fee									
Credit any overpa	-	re for the ming lee							
If an additional ext	•	quired, please consider this Account above.	a petition ther	efor and ch	narge any additional fees				
		n may become public. C formation and authorize			on should not be included 338.				
Amount Grand Total \$130									

Amendment Transmittal & Petition for Extension of Time under 37 CFR 1.136(a)

Docket Number

DEX0531US.NP

	Co	respondence Address			
Customer Number	32800		, , , , , , , , , , , , , , , , , , , ,		
		-OR-			
Name					
Address					
City	40000	State	1 Annual		
Country		Postal Code	7.7.70 (VIII) (VIII) (VIII) (VIII)		
Phone Number					
E-mail Address					
I hereby certify that this Amendment and Petition for Extension of Time, accompanying documents, and fee are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 In an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on the date indicated below:		I hereby certify that this Amendment and Petition for Extension of Timaccompanying documents, and fee are being deposited with the United Stat Postal Service with sufficient postage as first class mall in an envelo addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, Virgin 22313-1450 on the date indicated below: (Date of Mailing) (Name of Person Mailing Correspondence) (Signature of Person Mailing Correspondence)			
	of Person Mailing Correspondence) son Mailing Correspondence)	I hereby certify that this Amendment accompanying documents, and fee author to the United States Patent and Trademan	and Petitlon for Extension of Time,		
("Express Ma	il" Malling Label Number)	(Date of Transmission) (Nam	e of Person Transmitting Correspondence)		
		(Signature of Person Trans	mitting Correspondence)		

Signature Instructions

Select the name of the person who will electronically sign the Amendment and Petition for Extension of Time from the drop-down box below.

If a practitioner is not present in the drop-down list, you must close this form and select 'Add Practitioner...' in the Form Manager's Utility menu.

Verify that the signatory information is correct and press the 'eSign' button to electronically sign the submission. If you prefer to sign the form manually, simply do not click the 'eSign' button; just print and manually sign.

Signatory Drop-Down Box | Kathleen A. Tyrrell

Name	Kathleen A. Tyrrell	Registration Number		38,350		
Signatory Capacity	Attorney for Applicant(s)	E-mail Address	ail Address ktyrrell@licataandtyrrell.com			
eSign	/Kathleen A. Tyrrell/			Date Signed	12/20/2010	フ